



2814  
PTO/SB/21 (12/97)

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## TRANSMITTAL FORM

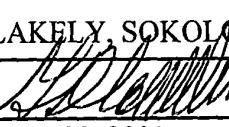
(to be used for all correspondence after initial filing)

		Application No.	09/902,912
		Filing Date	July 10, 2001
		First Named Inventor	Brian D. Possley
		Group Art Unit	2814
		Examiner Name	N. Ngo
Total Number of Pages in This Submission	10	Attorney Docket Number	42390P6643C

### ENCLOSURES (check all that apply)

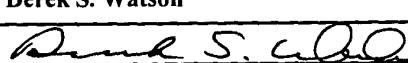
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<ul style="list-style-type: none"> <li>- Cited References</li> <li>- Return Postcard</li> </ul>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gregory D. Caldwell, Reg. No. 39,926  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	August 28, 2001

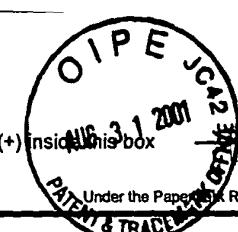
### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: **August 29, 2001**

Typed or printed name	Derek S. Watson		
Signature		Date	August 29, 2001

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PTO/SB/17 (12/99)

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$)

Complete if Known

Application No.	09/902,912
Filing Date	July 10, 2001 - 5 2001
First Named Inventor	Brian D. Possley
Examiner Name	N. Ngo
Group/Art Unit	2814
Attorney Docket Number	42390P6643C

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to credit any overpayments to:

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

Charge Any Additional Fee(s) Required  
Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

Applicant claims small entity status.  
See 37 CFR 1.27.

2.  Payment Enclosed:

Check  Credit card  Money Order  Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee	Fee	Fee Description	Fee Paid
Code	Code	Fee	Fee	Fee	Fee	(\$)	(\$)
101	710	201	355	Utility filing fee			
106	320	206	160	Design filing fee			
107	490	207	245	Plant filing fee			
108	710	208	355	Reissue filing fee			
114	150	214	75	Provisional filing fee			
<b>SUBTOTAL (1)</b>		(\$)					

### 2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
<input type="text"/>				
<input type="text"/>				

\*or number previously paid, if greater. For Reissues, see below

### Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Description
Code	Code	Code	Code	(\$)
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	260	204	135	Multiple Dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		(\$)		

### 3. ADDITIONAL FEE

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description	Fee Paid
Code	Code	Fee	Fee	Fee	Fee	(\$)
105	130	205	65	Surcharge - late filing fee or oath		
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.		
139	130	139	130	Non-English specification		
147	2,520	147	2,520	For filing a request for reexamination		
112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
115	110	215	55	Extension for response within first month		
116	390	216	195	Extension for response within second month		
117	890	217	445	Extension for response within third month		
118	1,390	218	695	Extension for response within fourth month		
128	1,890	228	945	Extension for response within fifth month		
119	310	219	155	Notice of Appeal		
120	310	220	155	Filing a brief in support of an appeal		
121	270	221	135	Request for oral hearing		
138	1,510	138	1,510	Petition to institute a public use proceeding		
140	110	240	55	Petition to revive - unavoidable		
141	1,240	241	620	Petition to revive - unintentional		
142	1,240	242	620	Utility issue fee (or reissue)		
143	440	243	220	Design issue fee		
144	600	244	300	Plant issue fee		
122	130	122	130	Petitions to the Commissioner		
123	130	123	130	Petitions related to provisional applications		
126	180	126	180	Submission of Information Disclosure Stmt		
581	40	581	40	Recording each patent assignment per property (times number of properties)		
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))		
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))		
179	710	279	355	Request for Continued Examination (RCE)		
169	900	169	900	Request for expedited examination of a design application		
Other fee (specify)						
Other fee (specify)						
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)				

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Gregory D. Caldwell	Registration No. (Attorney/Agent)	39,926	Telephone	(503) 684-6200
Signature		Date	08/29/01		

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